

# Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign and Political Finance Some RVILLE, MA

2020 JAN 17 A 10:51

	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date:	9-2019 Ending Date: 12-31-2019
Type of Report: (Check one)	
☐ 8th day preceding preliminary ☐ 8th day preceding election [	30 day after election year-end report dissolution
Candidate Full Name (if applicable)  School Committee Word Two  Office Sought and District  7 Waldo Ave #1 02143  Residential Address  E-mail: iKrepchin@ gwail.com  Phone # (optional): 617-852-8562	Committee to elect Ileha Krepung  Committee Name  Sociya Kasaw  Name of Committee Treasurer  7 Waldo Are #1 Some ville MA 02188  Committee Mailing Address  E-mail: ikrepunge gmail. com  Phone # (optional):
SUMMARY BALANC	E INFORMATION:
Line 1: Ending Balance from previous report	246.19
Line 2: Total receipts this period (page 3, line 11)	
Line 3: Subtotal (line 1 plus line 2)	
Line 4: Total expenditures this period (page 5, line	e 14)
Line 5: Ending Balance (line 3 minus line 4)	246.19
Line 6: Total in-kind contributions this period (pa	ge 6)
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used: East Can	unidge Savings Bank
Affidavit of Committee Treasurer:  I certify that I have examined this report including attached schedules and it is, to the best activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind of finance activity of all persons acting under the authority or on behalf of this committee in Signed under the penalties of perjury:  FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 bo Candidate with Committee certify that I have examined this report including attached schedules and it is, to the	contributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55.  (Treasurer's signature)  Date: 12225  x only)
activity, of all persons acting under the authority or on behalf of this committee in ac incurred any liabilities nor made any expenditures on my behalf during this reporting	cordance with the requirements of M.G.L. c. 55. I have not received any contributions
Candidate without Committee  I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursements campaign finance activity of all persons acting under the authority or on behalf of this signed under the persons.	s, in-kind contributions and liabilities for this reporting period and represents the seandidate in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury:	(Candidate's signature)

#### **SCHEDULE A: RECEIPTS**

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received (	alphabetical listing required)	Amount	(for contributions of \$200 or more)
			· ·
Line 9: Total Receipts ov	ver \$50 (or listed above)		
Line 10: Total Receipts \$	50 and under* (not listed above)		
Line 11: TOTAL RECE			

### **SCHEDULE A: RECEIPTS (continued)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
ine 9: Total Rece	ipts over \$50 (or listed above)	-	
ine 10: Total Reco	eipts \$50 and under* (not listed above)		
· · · · · · · · · · · · · · · · · · ·	RECEIPTS IN THE PERIOD	0	Enter on page 1, line 2

<sup>\*</sup> If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

#### SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to

report all expenditures. Please include your committee name and a page number on each page.)

To Whom Paid  Date Paid (alphabetical listing) Address		Address	Purpose of Expenditure Amo		
Date Lan					
,					
		3			
	,				
<u> </u>					
				,	
	,			,	
·					
,				,	
		· · · · · ·		,	
				L.,	
		Line 12: Total Expenditures ov	er \$50 (or listed above)		
		* 1 10 m 1 m 1 m 1 m	)		
		Line 13: Total Expenditures \$50	and under (not listed above)		
		Line 14: TOTAL EXPENDIT		(n)	

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

Page 4

## SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Anna Additional Company of the Compa				
		Line 12: Expenditures over \$5	0 (or listed above)	
• .		Line 13: Expenditures \$50 and	under* (not listed above)	
	The second secon	Line 14: TOTAL EXPENDIT		0

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

## SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value	
			,		
		*			
		Line 15: In-Kind Contribution			
		Line 16: In-Kind Contributions	\$50 & under (not listed above)		
•	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND C	CONTRIBUTIONS		

<sup>\*</sup> If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

Page 6

#### SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount	
and the second					
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTAN	DING LIABILITIES (ALL)		

					•	j	
					. •	<i>i</i>	•
						` •	
			•		•	-	
•							
•						* *	
•				•		• •	
			•		· ·		
		•			•	**	
			•			•	
•							
	*			4			,
				÷			
				-			
· ·							
						1. · · · · · · · · · · · · · · · · · · ·	•
		•	•				
							- *
					•		
					•••		
•						;	
						•	
				·			
		•			•		
			·	1 - 1			
						-	
			·	•			
				*			
		,			• •		
					•		•
				•	-		
		•					*
			•				
•					•		
				•			
			•			•	•
				•			
			•		٨.		
	•			•			
,							•